

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HL		4-10-01
O.I.P.E. CLASSIFIER		34	5/10
FORMALITY REVIEW	INT	954	5/17/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
— (Through numeral)...	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	Original
1 ✓	=
2 ✓	
3 ✓	
4 ✓	
5 ✓	
6 ✓	=
7 ✓	✓
8 ✓	✓
9 ✓	=
10 ✓	
11 ✓	
12 ✓	
13 ✓	
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17 ✓	
18 ✓	
19 ✓	
20 ✓	
21 ✓	=
22 ✓	=
23 ✓	=
24 ✓	✓
25 ✓	O
26 ✓	
27 ✓	
28 ✓	
29 ✓	
30 ✓	✓
31 ✓	O
32 ✓	✓
33 ✓	=
34 ✓	
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39 ✓	J
40 ✓	=
41 ✓	
42 ✓	
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44 ✓	
45 ✓	
46 ✓	
47 ✓	
48 ✓	
49 ✓	
50 ✓	

Claim	Date
Final	Original
51 ✓	
52 ✓	
53 ✓	
54 ✓	
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100 ✓	

Claim	Date
Final	Original
101 ✓	
102 ✓	
103 ✓	
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146 ✓	
147 ✓	
148 ✓	
149 ✓	
150 ✓	

If more than 150 claims or 10 actions
staple additional sheet here

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